## **Best Available Copy**

## PART B-ISSUE FEE TRANSMITTAL Box ISSUE FEE Complete and mail 1998 with ap ble fees, to: **Assistant Commissioner for Patents** Washington, D.C. 20231 BC BEC 2 1 2 MAILING INSTRUCTIONS: This form speud be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mainted to the current Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing. correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for **Certificate of Mailing** maintenance fee notifications. I hereby certify that this Issue Fee Transmittal is being deposited with CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) the United States Postal Service with sufficient postage for first class mail in an'envelope addressed to the Box Issue Fee address above on HM22/1001 the date indicated below. FINNEGAN HENDERSON FARABOW **GARRETT & DUNNER** 1300 I STREET NW (Depositor's name) WASHINGTON DC 20005-3315 ---(Signature) DATE MAILED **FYAMINER AND GROUP ART UNIT** TOTAL CLAIMS FILING DATE APPLICATION NO. 09/529,096 04/07/00 014 PATEL, S 1624 10/01/01 First Named MARUYAMA, 35 USC 154(b) term ext. = 0 Days. Applicant AMIDE DERIVATIVES OR SALTS THEREOF TITLE OF INVENTION DATE DUE FEE DUE BATCH NO. APPLN. TYPE . SMALL ENTITY CLASS-SUBCLASS ATTY'S DOCKET NO. 07385.0007 514-252.010 M82 UTILITY NO \$1240.00 01/02/02 2. For printing on the patent front page, list Changuet correspondence address or indication of "Fee Address" (37 CFR 1.363). FINNEGAN, HENDERSON, Use of the form(s) and Customer Number are recommended, but not required. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) FARABOW, GARRETT & the name of a single firm (having as a of correspondence address (or Change of Correspondence Address form PTO/S 2722) attached. DUNNER, L.L.P. member a registered attorney or agent) and the names of up to 2 registered patent ☐ "The address" indication (or "Fee Address" Indication form PTO/SB/47) attached. attorneys or agents. If no name is listed, no name will be printed. 4a. The following fees are enclosed (make check payable to Commissioner 3. ASSINGE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) E NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. of Patents and Trademarks): inclusion of assignee data is only appropriate when an assignment has been previously submitted to ST Issue Fee the CO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment. Advance Order - # of Copies. (A NUME OF ASSIGNEE YAMANOUCHI PHARMACEUTICAL CO., LTD. 4b. The following fees or deficiency in these fees should be charged to: 06-0916 (B) RESIDENCE: (CITY & STATE OR COUNTRY) Tokyo, Japan DEPOSIT ACCOUNT NUMBER. (ENCLOSE AN EXTRA COPY OF THIS FORM) Please check the appropriate assignee category indicated below (with not be printed on the patent) Ki issue Fee **XX** corporation or other private group entity $\Box$ government ☐ individual ☐ Advance Order - # of Copies The COMMISSIONER OF PATENTS AND TRADEMARKS requested to apply the Issue Fee to the application identified above. (Date) (Authorized Signature) 12/26/2001 EABUBAK2 00000142 09529096

David W. Hill, Reg. No. 28,220 | 12/21/01 |
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

01 FC:142

## TRANSMIT THIS FORM WITH FEE

1280.00 OP